

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other Water Injection Well

2. Name of Operator
 KENSON OPERATING COMPANY, INC.

3a. Address
 P O BOX 3531, MIDLAND TX 79702

3b. Phone No. (include area code)
 915/685.0878

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 UL D 330' FNL & 929' FWL Sec. 6, T25S R37E

5. Lease Serial No.
 IC-055546

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
 LANGLIE JAL UNIT

8. Well Name and No.
 LANGLIE JAL UNIT 31

9. API Well No.
 30-025-11475

10. Field and Pool, or Exploratory Area
 LANGLIE MATTIX (SRQGB)

11. County or Parish, State
 LEA, NEW MEXICO

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

12-13-01 MI & RU Rapid Transport pump truck. Pressured up to 1000# for 30 minutes, held okay.

Test witnessed by Karla Carrasco.

Handwritten initials/signature

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) M. A. SIRGO, III	Title ENGINEER
Signature <i>M. A. Sirgo</i>	Date 12-18-01

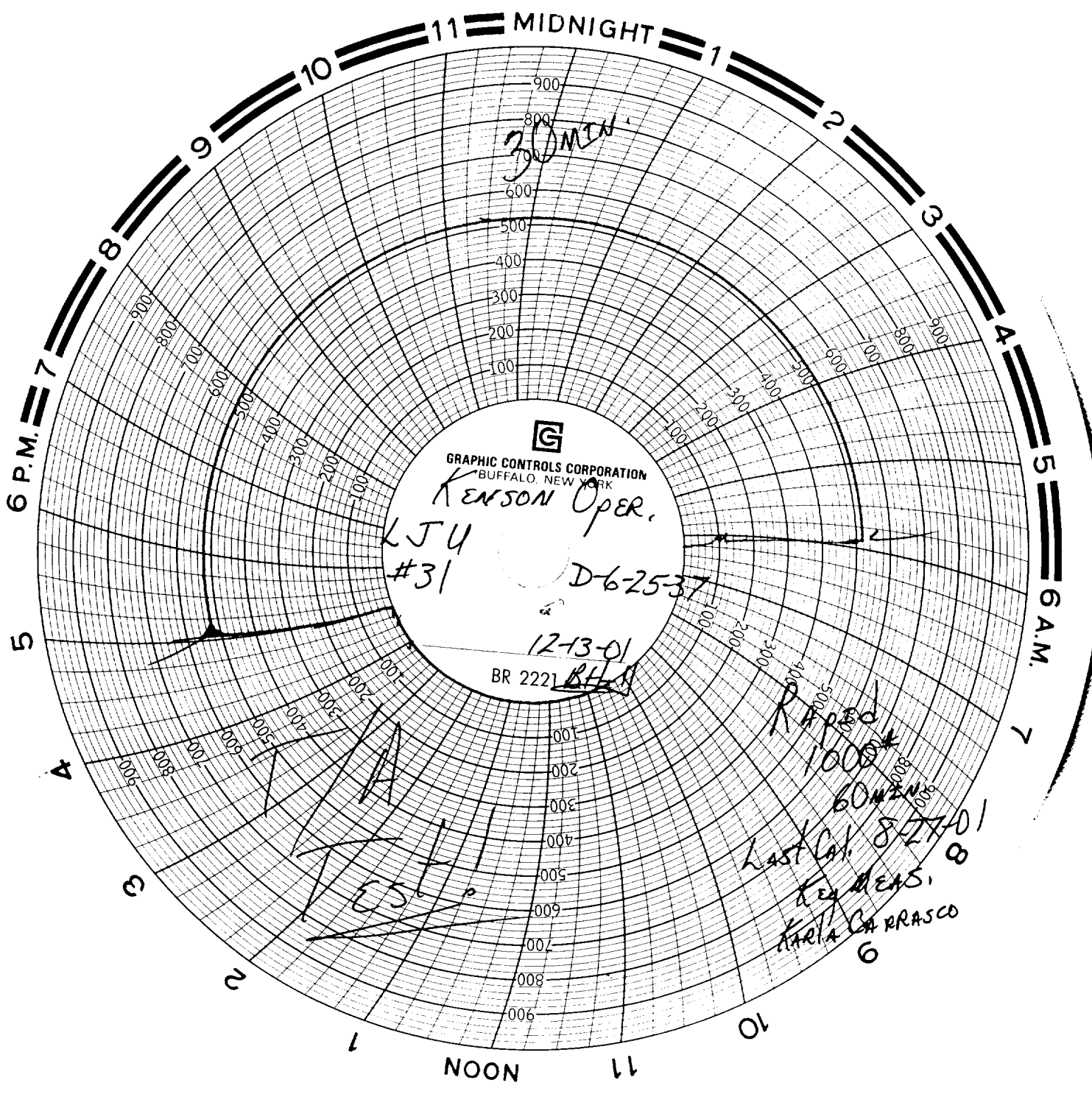
THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and with intent to defraud the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

KENSON Oper.

LJU
#31

D-625-37

12-13-01

BR 2221

Rapped
1000*
60 MIN

Last Cal. 8-27-01
Key MEAS.
KARLA CARRASCO
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